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APPLICANTS

Karlheinz Drauz, Freigericht, GERMANY;

Gunter Knaup, Bruchkoebel, GERMANY;

Gerard Richet, Saint-Quentin, FRANCE; Werner Kleophas, Duesseldorf, GERMANY;

Aldolf Gruenert, Ulm, GERMANY;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Verified and Acknowledged	Allowance Examiner's Signature	 Initials			

ADDRESS

22850
 OBLON, SPIVAK, MCCLELLAND, MAIER & NEUSTADT, P.C.
 1940 DUKE STREET
 ALEXANDRIA, VA
 22314

TITLE

AMINO ACID COMPOSITION FOR HEMODIALYSIS

FILING FEE

 RECEIVED
 890

FEES: Authority has been given in Paper
 No. _____ to charge/credit DEPOSIT ACCOUNT
 No. _____ for following:

- ☐ All Fees
- ☐ 1.16 Fees (Filing)
- ☐ 1.17 Fees (Processing Ext. of time)
- ☐ 1.18 Fees (Issue)